

Forever Wild Families
Application for 2015/2016 Program Year

Congratulations on your decision to apply for the Forever Wild Families program!

If your family is selected, we trust that you'll find the Forever Wild Families program a rewarding experience that broadens your knowledge of hunting, fishing and outdoor recreation in Wyoming.

Application

Complete all portions of the application (please type if possible). If you need more space, please feel free to add pages.

Interviews

Applicants will be screened by the Wyoming Game and Fish Department (WGFD). Eligible families will be interviewed and notified of their acceptance for the program.

Participant Fees

The cost of the program for participants is FREE, except for the purchase of fishing and hunting licenses for program events.

Sportsperson Identification Number

The information provided on this application will be used to provide each family member with an official WGFD Sportsperson Identification Number (SPID). The SPID will be used for tracking participation in our education programs and license-buying for as long as you fish and hunt in Wyoming. If you already have a SPID, please provide the number in the appropriate space on the application.

Return completed application to:
Tasha Sorensen
Forever Wild Families Statewide Coordinator
5400 Bishop Blvd
Cheyenne, WY 82006
Tasha.Sorensen@wyo.gov

Please Print or Type - Attach Additional Pages if Necessary

Date: _____

1. Full Name:

First Middle Last DOB ☐ M ☐ F

☐ I already have a SPID, it is: _____

2. Mailing Address:

Address City State Zip Code

3. Physical Address:

Address City State Zip Code

4. Telephone: Home: _____ Office: _____ Cell: _____

Email: _____

6. Family Members

Name: First Middle Last DOB ☐ M ☐ F

☐ I already have a SPID, it is: _____

Name: First Middle Last DOB ☐ M ☐ F

☐ I already have a SPID, it is: _____

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Name: First Middle Last DOB ☐ M ☐ F

☐ I already have a SPID, it is: _____

7. Emergency Contact:

Name:

Phone:

8. Years as a Wyoming Resident:

9. Current Occupation:

Company Name:

10. Why would your family like to participate in the Forever Wild Families program?

11. What obstacles or barriers may keep your family from participating in the Forever Wild Families program?

12. What is your family most excited to learn and/or experience in the Forever Wild Families program?

14. Please estimate your level of comfort or understanding by circling one of the following using a scale of 1-5, with 1 being poor and 5 being great. Candidates will be evaluated on potential for growth, so please provide an honest evaluation of your level of comfort. (In addition, the rankings below help program managers plan events that take into consideration the comfort level of participants.)

Poor					Great	
1	2	3	4	5		Recreating in large-carnivore (bear, wolf, lion) habitat
1	2	3	4	5		Being in group settings
1	2	3	4	5		Being in the presence of firearms
1	2	3	4	5		Committing one to two weekends per month
1	2	3	4	5		Awareness of WGFD programs and policies
1	2	3	4	5		Being in areas with limited mobile service
1	2	3	4	5		Processing game animals (rabbits, antelope, deer, elk, etc.)
1	2	3	4	5		Understanding of natural resource issues in Wyoming
1	2	3	4	5		Food preservation techniques and safe food handling
1	2	3	4	5		Touching a fish
1	2	3	4	5		Ability to balance time commitments
1	2	3	4	5		Planning and preparing to spend the night in the wilderness
1	2	3	4	5		Handling firearms
1	2	3	4	5		Ecology and plant identification

13. How did you hear about the Forever Wild Families program?

15. Full attendance at all events is required. Repeated lack of attendance may be grounds for dismissal from the program, as determined by WGFD. Program managers do their best to schedule events based on participants' availability, but they expect families to commit to one to two weekend events a month. Will you arrange to participate fully in the twelve-month program? ☐ Yes ☐ No

16. "I understand the expectations for my participation in the Wyoming Forever Wild Families Program. I hereby certify that all statements made in this application are true and complete. I agree and understand that any mis-statements or omission of material facts herein may cause disqualification of my application. I understand that selection of applicants is the sole responsibility of the Wyoming Game and Fish Department (WGFD). I agree to be available for a family interview at the time and place designated by the WGFD interview team to qualify for selection in the program."

Signatures (all family members) :

_____	Date: _____
_____	Date: _____
_____	Date: _____
_____	Date: _____
_____	Date: _____
_____	Date: _____
_____	Date: _____
_____	Date: _____

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